



REZONING APPLICATION

(For Rezoning only – no FLUM Amendment required)

Santa Rosa County Community Planning, Zoning & Development Division
6051 Old Bagdad Highway
Milton, FL 32583

Phone: (850) 981-7075 Fax: (850) 983-9874
E-Mail: planning@co.santa-rosa.fl.us

**** FOR OFFICIAL USE ONLY ****

Application No. _____-R-_____	Date Received: _____
FEE: _____	Received by: _____
Zoning District: _____	Receipt #: _____
Proposed Zoning District: _____	

All items on the application must be completed to prevent a delay of your request. Please include an application fee of \$270. This fee includes a \$255 review fee and a \$15 sign fee (1 sign). You will also need to include \$1.27 x each property owner within a 500 feet radius of the property lines. This fee is for a letter addressed to adjacent property owners to be sent via certificate of mailing and will be calculated at the time the application is submitted. Please make checks payable to Santa Rosa County.

APPLICANTS ARE RESPONSIBLE FOR THEIR SHARE OF ADVERTISING COSTS FOR THE PUBLIC HEARINGS AND WILL BE BILLED SEPARATELY FOR THESE COSTS.

TO BE COMPLETED BY THE APPLICANT:

I. **Owner's Name and Home Address:** (Please attach proof of ownership)

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: (_____) _____ Email (optional): _____

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: (_____) _____ Email (optional): _____

III. **Legal Description of Property** (Attach legal description including most recent survey. *NOTE: If only a portion of a parcel is requested for rezoning, include a legal description with the survey of the specific portion of the property requested for change.*)

Subdivision:

[illegible]

Existing Zoning: _____ Proposed Zoning: _____

Future Land Use Map (FLUM) Category: _____

Size of Property (acres) requested for Rezoning: _____

(Please be as specific as possible.)

IV. Facility Capacity Analysis

Applicant must provide information as to how the site will have access to potable water, sewage disposal, solid waste disposal, roads, and stormwater control. IF POTABLE WATER AND/OR SEWAGE ARE TO BE PROVIDED BY A UTILITY, THE APPLICANT MUST ATTACH A LETTER FROM SUCH UTILITY CERTIFYING THAT ADEQUATE CAPACITY IS AVAILABLE TO SERVE THE SITE. IF RESIDENTIAL DEVELOPMENT OF MORE THAN TEN (10) ACRES OR MORE THAN TEN (10) DWELLING UNITS PER ACRE IS PROPOSED, THE APPLICANT MUST ALSO ATTACH A LETTER FROM THE SCHOOL DISTRICT PROVIDING A SCHOOL CAPACITY WAIVER OR OTHER ACCOMMODATION.

A. Potable Water (Check One)

Source:

Private Water Well(s) _____

Private Community System _____

Public Water System _____

(Attach Letter of Certification)

Provider _____

Provider _____

B. Sewage Disposal (Check One)

Source:

Private Septic Tank(s) _____

Private Sewage System _____

Public Sewage System _____

(Attach Letter of Certification)

Provider _____

Provider _____

C. Solid Waste Disposal

Source:

Private Hauler: _____

Government Hauler: _____

D. Stormwater Control

Describe how stormwater will be controlled and treated.

E. Traffic Capacity

Describe the potential impacts to affected roadways.

E. School Capacity (for rezoning requests involving more than 10 acres of property or proposed for residential development of more than 10 dwelling units per acre)

Potentially affected school(s): _____

(Attach Letter of Certification if applicable)

NOTE: An application is not considered complete until **ALL** required information is received.

V. Notice Requirements:

The Planning Department will post a sign on the property prior to the public hearings. Letters stating the requested action(s) to be considered at the Local Planning Board and Board of County Commissioners' meetings will be sent via certificate of mailing by the Planning Department to all property owners within 500 feet of the subject property. The applicant is responsible for obtaining a printout and mailing labels from the Property Appraiser's Office (6495 Caroline Street, Ste. K in Milton (983-1880), indicating all property owners within 500 feet of the property. The printout and labels must be submitted to the Planning Department with this application. **Please note that the Property Appraiser's Office only provides this information; other questions about the application or the process must be directed to the Planning and Zoning Office.**

VI. Review Procedure:

- A. Once an application has been deemed complete, County staff will review the application for consistency with the Comprehensive Plan and Land Development Code.
- B. The Local Planning Board will consider the request at a public hearing and make a recommendation to the Board of County Commissioners (BCC). The BCC will consider the Planning Board's recommendation at a subsequent public hearing. The applicant will be notified as to the date of the meetings. The applicant or his/her representative is strongly encouraged to attend these meetings.
- C. If approved by the BCC, the rezoning becomes effective upon the effective date of the ordinance which is filed in the office of the Secretary of State within ten (10) days of enactment and takes effect upon said filing.
- D. Depending upon the specific proposed use, the applicant may be required to undergo Conditional Use Approval prior to submitting for site plan review. If Conditional Use approval is given or is not required, the applicant must apply for site plan review prior to obtaining any building permits.

VII. Certification and Authorization

- A. By my signature hereto, I do hereby certify that the information contained in this application is true and correct, and understand that deliberate misrepresentation of such information will be grounds for denial or reversal of this application and/or revocation of any approval based upon this application.
- B. I do hereby authorize County staff to enter upon my property at any reasonable time for purposes of site inspection.
- C. I do hereby authorize the placement of a public notice sign(s) on my property at a location(s) to be determined by County staff.
- D. If applicable, I do hereby authorize the agent described in Part II of this application to act on my behalf in all matters pertaining to this Rezoning petition.

Applicant Name (Type or Print)

Applicant Signature

Title (if applicable)

Date

APPLICATION CHECKLIST
REZONING

1. ____ Owner(s) Name, Home Address and Telephone Number
2. ____ Proof of Ownership
3. ____ Authorized Agent(s) Name, Address, and Telephone Number
4. ____ Agent Authorization
5. ____ Legal Description of Property (for parcel and/or specific portion thereof requested for change):
 - Legal Description Attached ____
 - Street Address ____
 - Parcel ID Number ____
 - Intended Use of Property ____
6. ____ Certified boundary survey of all property to be rezoned (optional)
7. ____ Preliminary site plan of proposed property (optional)
8. ____ Copy of covenants and restrictions (if property is located in a platted subdivision).
9. ____ Signature of owner and agent (if applicable)
10. ____ Application Fee
11. ____ Certified list of property owners within 500 ft. radius
12. ____ Labels with the property owners' addresses (2 sets)
13. ____ Availability Letters from Water and Sewer Provider
14. ____ Letter from school district that provides school capacity waiver or other accommodation (if residential development of more than 10 acres or more than 10 dwelling units per acre is proposed)